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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Applicati n Number	08/926,277	33.		
Filing Date	09/05/1997	HAI		R
First Named Inventor	Vachris	الر		0.1
Group Art Unit	2877	£Υ	١.	m
Examiner Name	Unknown	CE	ω,	<
Attorney Docket Number	12913-0028	22	200	

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To: Assistant Commission Washington, DC 20				L. C. STATE	800			
I hereby apply to withdraw	w as attorney or agent for the above ide	entified p	oatent applica	ation.				
The reasons for this requi	est are:							
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Address	22362 Gilberto, Suite 130							
City	Rancho Santa Margarita	State	CA	ZIP	92688			
Country	US							
Telephone		Fax						
This request is made on behalf of myself and								
all the attorneys/agents of record,								
the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number 31278								
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	Eldredge, Esq.							
Signature	~ \$ No L							
Date	12/22/02				t			
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time								
period for response or possible extension period, the request to withdraw is normally disapproved.								

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